STATE OF NEW HAMPSHIRE

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JUL 25 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15) PLEASE PRINT

I. Name of L	DEPARTMENT O			
II. Name of I	lobbyist's partnership, firm	or corporation, if a	ny:	
Orr & Res	no. P.A.			
	(Name of partnership, firm	or corporation)		
45 S. Mai	in Street, P.O. Box 3550	Concord	NH	03302
Business Addr		(Town/City)	(State)	(Zip Code)
(603) <u>224</u> (Tel	-2381 (elephone)	603) <u>224-2318</u> (Fax)	e-mail <u>sgeiger(a</u>	dorr-reno.com
	ement covers: (Choose one xpense transactions which a		ts for each client, OR you ma o any one client).	y file a separate report for
☑ All report	table transactions occurring i	n the months prior to	the reporting date relative to the	e following client:
NECTA	New England Cable a	nd Telecommunic	ations Association, Inc.)	
			bbyist Registration Form)	
<u>OR</u>				
•	able transactions by the lobby any particular client.	yist (including the lob	byist's family), or the lobbying	; firm listed below which are
IV. Date of F	Report April 25, 2018]	July 25, 2018 🖾	
Reports cover:	activity from date of regist	ration to 3/31/18	activity from 4/1/18 to 6/30/18	
	October 31, 2018 activity from 7/1/18 to		January 30, 2019 activity from 10/1/18 to 12/31/	718
	checked, complete just this fo		transactions made since the Secretary of State's Office, S.	
VI Check if	additional reports are atta	ched:		
	•		ile Addendum A- Fees and Ex	openses
•	ve paid an honorarium or rei	· •	u must file Addendum B- Rep	- · · · · · · · · · · · · · · · · · · ·
☐ If you, yo	our firm, or your family has r	nade political contrib	utions, you must file Addendu	m C- Political Contributions
I have read R	ment/Affirmation by Lobby SA 15, RSA 15-B, RSA 14-6 to the best of my knowledge	C and RSA 664 and he	ereby swear or affirm that the f	oregoing information is true
A 1	Dura-		07/25/18	
(Signature of	f lobbyist)		(Dat	e)
Susan S. (Print Name				

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) <u>Susan S. Geiger</u>		
II. Name of lobbyist's partnership, firm or corporation, if any:		
Orr & Reno, P.A. (Name of partnership, firm or corporation)		
III. Name of Client NECTA (New England Cable & Telecommunications Association, Inc.)	Date <u>07</u>	//25/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, governmen including research, monitoring legislation, and related legal work. The greduced by any expenses:	t relations, or p	oublic relations service
a) Total of all fees received in this reporting period	a) \$	23,590.84
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y		9,975.00
c) Total of all fees received to date (Add lines a and b)	c) \$	33,565.84
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	0.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expensed individual expenses where the expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this repany purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if ex may be filed to e aggregate to expenses; (b) the ele: meals purchess than \$10 the ed with a value orting period of ue of greater the er than \$25, but s, expense rein	spenditures are made by for the lobbyist(s)/firm tal of all expenses paid aggregate total of a hased during a business to the person of \$25.00 or less); and figreater than \$25.00 for the person of the person of the person of \$25.00 for less); and figreater than \$25.00 for less than \$25.00 for less than \$25.00 for not greater than \$50 for political properties.
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	0.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$	0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00

d) Total expenses for this reporting period	d) \$	0.00
(Add lines a, b and c)		
e) Total of expenses paid this calendar year, prior to this reporting period	e) \$	50.00
(This should be the amount on line f of addendum A for last month's report)		
f) Total of all expenses year to date	f) \$	50.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees du	uring this reporting
Paid to:	Amount:	
	\$	
	\$	
	\$	
<u> </u>	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the fore	egoing information
is the and complete to the best of my knowledge and belief.		
A a Marine	07/25/18	8
(Signature of lobbyist)	(Da	te)
Susan S. Geiger		
(Print Name of lobbyist)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporate	ion: Orr & Reno, P.A.
Name of Client (leave blank if Statement is for t	he partnership, firm, or corporation and not related to any
particular client): NECTA (New England Cal	ole and Telecommunications Association, Inc.)
Date of Report (check one):	
April 25, 2018 ☐ July 25, 2018 ☒	October 31, 2018 January 30, 2019
	Statement of Income and Expenses described above, and Statement (insert the number of Addendum forms being
Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing inforcomplete to the best of my knowledge and belief	rmation on the Statement and each Addendum is true and
A D A	07/25/18
(Signature of lobbyist)	(Date)
Susan S. Geiger	
(Print Name of lobbyist)	
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